

In re Application of:

Docket No. 03500.014055

NOBUHIRO ITO ET AL.

Application No.: 09/413,774

Examiner: S. Roy

Filed: October 7, 1999

Group Art Unit: 2879

For: ELECTRON BEAM APPARATUS AND SPACER

Date: March 5, 2003

COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 143*	MINUS	** 131	12	x \$9 \$18	\$216.00
INDEP. CLAIMS	* 36	MINUS	*** 30	6	x \$42 \$84	\$504.00
Fee for Multiple Dependent claims \$140°/\$280						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$720.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$ 720.00 is enclosed.

☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$ _____ to cover the fee for a ____ - month extension is enclosed.

☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants

Registration No. 42476

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

NY_MAIN 332430-1

Commissioner for Patents
Washington, D.C. 20231

Date 2 / 6 / 03
Mo Day Yr.
03500. 014055
Atty Docket
Application No. 09/413,774

Sir, Kindly acknowledge receipt of the accompanying.

☒ ~~Response to Official Action.~~ *Supplemental Amendment*

☒ Check for \$ 720.00 (claims fee) *Additional*

☐ Petition under 37 CFR 1.136 and Check for \$ _____

☐ Notice of Appeal and Check for \$ _____

☐ Information Disclosure Statement, PTO-1449 and _____ documents

☐ Claim for priority and certified copies of _____ priority applications

☐ Issue fee transmittal and Check for \$ _____

☐ Other (specify) _____

by placing your receiving date stamp hereon and attaching to the envelope.

Atty. FAD/mw Due Date 7 / 2 / 0
Mo Day Yr.

FD-50 (0)

